In-Home Services Fiscal Agent (FA) and Electronic Visit & Verification (EVV) Guiding Principles

- 1. Design, development, and operation of the FA and EVV functionality will align with the goals of removing claims adjudication processes currently conducted within DHHS systems that may include the MMIS, CONNECT, NFOCUS and Therap systems.
- 2. Clear and timely communications to affected clients/participants, providers, and other internal/external stakeholders will be ongoing throughout duration of project and post golive to the extent necessary.
- 3. DHHS will seek input from stakeholders regarding possible program changes and FA/EVV planning, design, development, and implementation activities.
- 4. Appropriate and timely education will be made available to clients/participants, providers, and other internal/external stakeholders to assist in the transition to FA/EVV administered services.
- 5. Required services included in initial EVV scope will be limited to extent necessary to meet minimal compliance of the 21st Century Cures Act. Additional services will be considered for EVV after successful go-live and stabilization period.
- 6. FA/EVV design, development, and implementation will be individual provider centric and will be designed with intent to remove the State of Nebraska as a joint employer of individual providers as defined by the Fair Labor Services Act.
- 7. Relevant HCBS program changes will be identified, assessed, and reviewed for possible implementation prior to FA/EVV go-live.
- 8. EVV design, development, and implementation (DDI) will follow Medicaid Enterprise Certification Lifecycle (MECL) and CMS guidelines to receive enhanced federal funding for DDI and ongoing operations.
- 9. The FA/EVV vendor systems will integrate with the state systems and other vendor systems as required.
- 10. Design, development, and implementation of the FA/EVV systems, and related programmatic changes, will be completed with a goal of improving customer service to clients/participants and providers while seeking to minimalize disruptions to the provision of services to clients/participants and payment to providers for services rendered.